

AMENDED IN ASSEMBLY APRIL 19, 2012

CALIFORNIA LEGISLATURE—2011–12 REGULAR SESSION

Assembly Concurrent Resolution

No. 142

Introduced by Assembly Member Alejo

(Coauthors: Assembly Members Allen, Ammiano, Atkins, Blumenfield, Bonilla, Bradford, Brownley, Buchanan, Butler, Charles Calderon, Campos, Carter, Chesbro, Davis, Dickinson, Eng, Feuer, Fong, Fuentes, Galgiani, Gatto, Gordon, Hall, Hayashi, Roger Hernández, Hill, Huber, Hueso, Huffman, Lara, Bonnie Lowenthal, Ma, Mendoza, Mitchell, Monning, Nestande, Pan, Perea, V. Manuel Pérez, Portantino, Skinner, Smyth, Swanson, Torres, Wieckowski, Williams, and Yamada)

April 12, 2012

Assembly Concurrent Resolution No. 142—Relative to National Multicultural Cancer Awareness Week.

LEGISLATIVE COUNSEL'S DIGEST

ACR 142, as amended, Alejo. National Multicultural Cancer Awareness Week.

This measure would designate the week of April 15 to 21, 2012, inclusive, as “National Multicultural Cancer Awareness Week,” and would encourage the promotion of policies and programs that seek to reduce cancer disparities and improve cancer prevention, detection, treatment, and followup care for all Californians.

Fiscal committee: no.

- 1 WHEREAS, National Multicultural Cancer Awareness Week
- 2 has been observed across the country each year since 1987 to bring

1 attention to the disparities of cancer among medically underserved
2 populations; and

3 WHEREAS, The American Cancer Society is participating in
4 National Multicultural Cancer Awareness Week to point out the
5 disparities in cancer burdens and to encourage public and private
6 sector commitments in helping eliminate these disparities; and

7 WHEREAS, California is the most populous and ethnically and
8 culturally diverse state in the country, and thus, is in a position to
9 provide leadership for the nation to address the reduction of the
10 incidence of cancer among all races and genders; and

11 WHEREAS, In California, disparities exist in knowledge about
12 cancer, cancer survival, and access to early detection, high-quality
13 treatment, health care coverage, and health care. Systemic
14 inequities also exist, including differences in occupational hazards,
15 environmental exposures to pollution and other toxins, access to
16 education, nutrition, physical activity, safe neighborhoods, healthy
17 foods, and other factors that contribute to an increased or reduced
18 risk of cancer; and

19 WHEREAS, The risk of developing and dying from cancer
20 varies considerably among different cultural populations in
21 California. The medically underserved are often diagnosed at later
22 stages, and with a higher incidence of cancers with higher
23 mortality, like lung cancer, and are more likely to receive lower
24 quality health care; and

25 WHEREAS, In California, African American males have the
26 highest overall cancer incidence and mortality rates. African
27 American women are more likely to die of breast cancer, although
28 non-Hispanic white women are the most likely to be diagnosed
29 with the disease. African Americans have substantially higher rates
30 of cancers of the stomach, liver, larynx, myeloma, and Kaposi's
31 sarcoma than non-Hispanic whites. African American men are at
32 especially high risk for prostate cancer, more than any other racial
33 and ethnic group; and

34 WHEREAS, In California, Asian and Pacific Islanders are the
35 only racial and ethnic group within which cancer is the leading
36 cause of death. Lung cancer is the most common cancer among
37 Laotian women, while breast cancer is the most common cancer
38 among women of all racial and ethnic groups. Lung cancer is the
39 most common cancer among Cambodian, Laotian, and Vietnamese
40 men, while prostate cancer is the most common cancer for men in

1 most ethnic groups. Colorectal cancer incidence from 1988 to 2007
 2 increased among Korean men and among Korean, Filipino, and
 3 South Asian women, while incidence among other Asian
 4 Americans declined. Asian and Pacific Islanders and Latinos have
 5 substantially higher rates of liver and stomach cancer than other
 6 groups. Cambodian, Laotian, and Vietnamese women have much
 7 higher rates of cervical cancer than non-Hispanic white women.
 8 Samoan and Tongan women have higher rates of cancers than
 9 non-Hispanic white women. Stomach and liver cancers are among
 10 the top five cancers in most Asian and Pacific Islander groups.
 11 Asian Americans have among the lowest rates of screening for
 12 breast, cervical, and colorectal cancers. A significant number of
 13 Korean Americans have never heard of the pap smear test. There
 14 remains a lack of data about factors related to cancer, cancer
 15 control, and effective interventions among Asian and Pacific
 16 Islanders; and

17 WHEREAS, In California, Latinos have substantially higher
 18 rates of stomach and liver cancers than other Californians. Latinos
 19 have higher rates of acute lymphocytic leukemia, Kaposi's
 20 sarcoma, and cervical cancer than non-Hispanic whites. Cancer is
 21 the second leading cause of death for Latinos. Latinos have the
 22 highest likelihood of being uninsured. Latino women have the
 23 highest risk of developing cervical cancer, which is about twice
 24 as high as non-Hispanic white women, African American women,
 25 and Asian and Pacific Islander women; and

26 WHEREAS, Members of the lesbian, gay, bisexual, and
 27 transgender community are at greater risk for cancer, face specific
 28 challenges accessing quality health care because of insurance
 29 policies that fail to cover same-sex partners, and may hesitate to
 30 access health care because of previous discrimination in health
 31 care settings. Lesbians have fewer mammograms, pelvic
 32 examinations, and pap smear tests than heterosexual women. There
 33 remains a lack of data about factors related to cancer, cancer
 34 control, and effective interventions in the lesbian, gay, bisexual,
 35 and transgender community; now, therefore, be it

36 *Resolved by the Assembly of the State of California, the Senate*
 37 *thereof concurring*, That the Legislature declares the week of April
 38 15 to 21, 2012, inclusive, as "National Multicultural Cancer
 39 Awareness Week," and encourages the promotion of policies and
 40 programs that seek to reduce cancer disparities and, as a result,

- 1 improve cancer prevention, detection, treatment, and followup
- 2 care for all Californians; and be it further
- 3 *Resolved*, That the Chief Clerk of the Assembly transmit copies
- 4 of this resolution to the author for appropriate distribution.

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